

Fill in this information to identify the case:

Debtor 1 Dirasha Jackson

Debtor 2

(Spouse, if filing)

United States Bankruptcy Court Northern District of Illinois

Case number: 20-13099

FILED

U.S. Bankruptcy Court
Northern District of Illinois

10/9/2020

Jeffrey P. Allsteadt, Clerk

**Official Form 410
Proof of Claim**

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Illinois Department of Revenue</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Illinois Department of Revenue Bankruptcy Section</u>	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? <u>Illinois Department of Revenue</u> Name Bankruptcy Section PO Box 19035 Springfield, IL 62794-9035 Contact phone <u>2175579474</u> Contact email <u>Rev.Bankruptcy@Illinois.gov</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (if different) Name Contact phone _____ Contact email _____
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>3657</u>
7. How much is the claim?	<div style="display: flex; justify-content: space-between;"> \$ <u>1997.14</u> <div> Does this amount include interest or other charges? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A). </div> </div>
8. What is the basis of the claim?	<p>Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).</p> <p>Limit disclosing information that is entitled to privacy, such as healthcare information.</p> <p style="text-align: center;"><u>Taxes</u></p>
9. Is all or part of the claim secured?	<div> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. The claim is secured by a lien on property. </div> <p>Nature of property:</p> <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>. <input checked="" type="checkbox"/> Motor vehicle <input checked="" type="checkbox"/> Other. Describe: <u>Real and personal property of the Debtor</u> </div> <p style="margin-top: 20px;">Basis for perfection: <u>See Attached</u></p> <p>Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)</p> <div style="margin-top: 10px;"> Value of property: \$ _____ </div> <div style="margin-top: 10px;"> Amount of the claim that is secured: \$ <u>158.05</u> </div> <div style="margin-top: 10px;"> Amount of the claim that is unsecured: \$ <u>1839.09</u> (The sum of the secured and unsecured amounts should match the amount in line 7.) </div> <div style="margin-top: 20px;"> Amount necessary to cure any default as of the date of the petition: \$ <u>158.05</u> </div> <div style="margin-top: 10px;"> Annual Interest Rate (when case was filed) <u>5</u> % </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Fixed <input checked="" type="checkbox"/> Variable </div>
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Identify the property: <u>Reserve right should it be determined any payment due debtor</u>

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. <i>Check all that apply:</i>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; vertical-align: top;"> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p> </td> <td style="width: 30%; vertical-align: top;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</td> <td style="width: 20%; text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input checked="" type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).</td> <td style="text-align: right;">\$ 1359.69</td> </tr> <tr> <td><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(<u> </u>) that applies</td> <td style="text-align: right;">\$</td> </tr> </table> </td> </tr> </table>	<p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</td> <td style="width: 20%; text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input checked="" type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).</td> <td style="text-align: right;">\$ 1359.69</td> </tr> <tr> <td><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(<u> </u>) that applies</td> <td style="text-align: right;">\$</td> </tr> </table>	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$	<input type="checkbox"/> Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$	<input type="checkbox"/> Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$	<input checked="" type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ 1359.69	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(<u> </u>) that applies	\$
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* Amounts are subject to adjustment on 4/1/22 and every 3 years after that for cases begun on or after the date of adjustment.																

Part 3: Sign Below

<p>The person completing this proof of claim must sign and date it. FRBP 9011(b).</p> <p>If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.</p> <p>A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157 and 3571.</p>	<p>Check the appropriate box:</p> <p><input checked="" type="checkbox"/> I am the creditor. <input type="checkbox"/> I am the creditor's attorney or authorized agent. <input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. <input type="checkbox"/> I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.</p> <p>I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.</p> <p>I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.</p> <p>I declare under penalty of perjury that the foregoing is true and correct.</p> <p>Executed on date <u>10/9/2020</u> MM / DD / YYYY</p> <p><u>/s/ Christine Murphy</u> Signature</p> <p>Print the name of the person who is completing and signing this claim:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Name</td> <td>Christine Murphy</td> </tr> <tr> <td rowspan="2">Title</td> <td>First name Middle name Last name</td> </tr> <tr> <td>RTS</td> </tr> <tr> <td>Company</td> <td>Illinois Department of Revenue Bankruptcy Section</td> </tr> <tr> <td rowspan="4">Address</td> <td>Identify the corporate servicer as the company if the authorized agent is a servicer</td> </tr> <tr> <td>PO Box 19035</td> </tr> <tr> <td>Number Street</td> </tr> <tr> <td>Springfield, IL 62794-9035</td> </tr> <tr> <td rowspan="2">Contact phone</td> <td>City State ZIP Code</td> </tr> <tr> <td>2175579474 Email Rev.Bankruptcy@Illinois.gov</td> </tr> </table>	Name	Christine Murphy	Title	First name Middle name Last name	RTS	Company	Illinois Department of Revenue Bankruptcy Section	Address	Identify the corporate servicer as the company if the authorized agent is a servicer	PO Box 19035	Number Street	Springfield, IL 62794-9035	Contact phone	City State ZIP Code	2175579474 Email Rev.Bankruptcy@Illinois.gov
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Illinois Department of Revenue
Attachment to Proof of Claim
Bankruptcy 20-13099 filed 29-Jun-2020 by
Dirasha Jackson

Period	Assessed*	Tax Type	Tax ID	Calculated To Bankruptcy Petition Date			Lien	
				Tax	Penalty	Interest	Date	County
12/31/2015	12/17/2018	IL Individual Income Tax	3657	\$0.00	\$79.60	\$78.45	08/29/2019	Cook
12/31/2016	01/16/2020	IL Individual Income Tax	3657	\$296.00	\$127.20	\$68.22		
12/31/2017	08/06/2018	IL Individual Income Tax	3657	\$0.00	\$214.10	\$2.99		
12/31/2018	07/17/2019	IL Individual Income Tax	3657	\$376.00	\$67.60	\$23.46		
12/31/2019	Estimated	IL Individual Income Tax	3657	\$587.00	\$70.50	\$6.02		

* If "Assessed" = "Priority" then equitable tolling applies